

B5 (Official Form 5) (12/07)

United States Bankruptcy Court Northern District of Illinois		INVOLUNTARY PETITION	
IN RE (Name of Debtor – If Individual: Last, First, Middle) Sysix Technologies, LLC		ALL OTHER NAMES used by debtor in the last 8 years (Include married, maiden, and trade names.)	
Last four digits of Social-Security or other Individual's Tax-I.D. No./Complete EIN (If more than one, state all.):			
STREET ADDRESS OF DEBTOR (No. and street, city, state, and zip code) 1010 Executive Drive, Ste. 280, Westmont, IL 60559-6187		MAILING ADDRESS OF DEBTOR (If different from street address)	
COUNTY OF RESIDENCE OR PRINCIPAL PLACE OF BUSINESS DuPage County		ZIP CODE	
LOCATION OF PRINCIPAL ASSETS OF BUSINESS DEBTOR (If different from previously listed addresses)			
CHAPTER OF BANKRUPTCY CODE UNDER WHICH PETITION IS FILED <input type="checkbox"/> Chapter 7 <input checked="" type="checkbox"/> Chapter 11			
INFORMATION REGARDING DEBTOR (Check applicable boxes)			
Nature of Debts (Check one box.) Petitioners believe: <input type="checkbox"/> Debts are primarily consumer debts <input checked="" type="checkbox"/> Debts are primarily business debts	Type of Debtor (Form of Organization) <input type="checkbox"/> Individual (Includes Joint Debtor) <input checked="" type="checkbox"/> Corporation (Includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51)(B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other	
VENUE <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in the District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> A bankruptcy case concerning debtor's affiliate, general partner or partnership is pending in this District.		FILING FEE (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Petitioner is a child support creditor or its representative, and the form specified in § 304(g) of the Bankruptcy Reform Act of 1994 is attached. <i>[If a child support creditor or its representative is a petitioner, and if the petitioner files the form specified in § 304(g) of the Bankruptcy Reform Act of 1994, no fee is required.]</i>	
PENDING BANKRUPTCY CASE FILED BY OR AGAINST ANY PARTNER OR AFFILIATE OF THIS DEBTOR (Report information for any additional cases on attached sheets.)			
Name of Debtor	Case Number	Date	
Relationship	District	Judge	
ALLEGATIONS (Check applicable boxes) 1. <input checked="" type="checkbox"/> Petitioner (s) are eligible to file this petition pursuant to 11 U.S.C. § 303 (b). 2. <input type="checkbox"/> The debtor is a person against whom an order for relief may be entered under title 11 of the United States Code. 3.a. <input type="checkbox"/> The debtor is generally not paying such debtor's debts as they become due, unless such debts are the subject of a bona fide dispute as to liability or amount; or b. <input type="checkbox"/> Within 120 days preceding the filing of this petition, a custodian, other than a trustee receiver, or agent appointed or authorized to take charge of less than substantially all of the property of the debtor for the purpose of enforcing a lien against such property, was appointed or took possession.		COURT USE ONLY	

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Name of Debtor Sysix Technologies, LLC

Case No. _____

TRANSFER OF CLAIM		
<input type="checkbox"/> Check this box if there has been a transfer of any claim against the debtor by or to any petitioner. Attach all documents that evidence the transfer and any statements that are required under Bankruptcy Rule 1003(a).		
REQUEST FOR RELIEF		
Petitioner(s) request that an order for relief be entered against the debtor under the chapter of title 11, United States Code, specified in this petition. If any petitioner is a foreign representative appointed in a foreign proceeding, a certified copy of the order of the court granting recognition is attached.		
Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.		
<input checked="" type="checkbox"/> <u>Arrow Enterprise Computing Solutions, Inc.</u> Signature of Petitioner or Representative (State title) _____ <u>Rene Stasiak</u> Name of Petitioner _____ Date Signed <u>9/24/09</u> Name & Mailing <u>Rene Stasiak</u> Address of Individual <u>7459 Lima Street</u> Signing in Representative <u>Englewood, Colorado 80112</u> Capacity <u>Director, Financial Services</u>	<input checked="" type="checkbox"/> _____ Signature of Attorney _____ Date <u>9/29/09</u> <u>Jeffrey M. Galen</u> Name of Attorney Firm (If any) _____ Address <u>Galen & Davis, LLP</u> <u>16255 Ventura Boulevard, Suite 900</u> <u>Encino, California 91436</u> Telephone No. (818) 986-5685	
<input checked="" type="checkbox"/> _____ Signature of Petitioner or Representative (State title) _____ <u>Rene Stasiak</u> Name of Petitioner _____ Date Signed <u>9/24/09</u> Name & Mailing _____ Address of Individual _____ Signing in Representative _____ Capacity _____	<input checked="" type="checkbox"/> _____ Signature of Attorney _____ Date _____ Name of Attorney Firm (If any) _____ Address _____ Telephone No. _____	
<input checked="" type="checkbox"/> _____ Signature of Petitioner or Representative (State title) _____ Name of Petitioner _____ Date Signed _____ Name & Mailing _____ Address of Individual _____ Signing in Representative _____ Capacity _____	<input checked="" type="checkbox"/> _____ Signature of Attorney _____ Date _____ Name of Attorney Firm (If any) _____ Address _____ Telephone No. _____	
PETITIONING CREDITORS		
Name and Address of Petitioner <u>Arrow Enterprise Computing Solutions, Inc.</u>	Nature of Claim <u>Commercial Line Of Credit</u>	Amount of Claim <u>3,551,640.14</u>
Name and Address of Petitioner	Nature of Claim	Amount of Claim
Name and Address of Petitioner	Nature of Claim	Amount of Claim
Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.	Total Amount of Petitioners' Claims	

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Name of Debtor Sysix Technologies, LLC

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Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.		
<div style="border-bottom: 1px solid black; margin-bottom: 5px;"> x _____ Signature of Petitioner or Representative (State title) </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Comerica Bank Name of Petitioner </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <div style="display: flex; justify-content: space-between;"> Name & Mailing Jacob Villemure </div> <div style="display: flex; justify-content: space-between;"> Address of Individual Vice President </div> <div style="display: flex; justify-content: space-between;"> Signing in Representative Capacity 500 Woodward Detroit, MI 48226 </div> </div> <div style="display: flex; justify-content: space-between;"> Date Signed </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;"> x _____ Signature of Attorney </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <div style="display: flex; justify-content: space-between;"> Name of Attorney Firm (If any) Date </div> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Telephone No. </div>	
<div style="border-bottom: 1px solid black; margin-bottom: 5px;"> x <i>Clark Coogan</i> CHIEF FINANCIAL OFFICER Signature of Petitioner or Representative (State title) </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Viztek LLC Name of Petitioner </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <div style="display: flex; justify-content: space-between;"> Name & Mailing Clark Coogan </div> <div style="display: flex; justify-content: space-between;"> Address of Individual CFO </div> <div style="display: flex; justify-content: space-between;"> Signing in Representative Capacity 6491 Powers Avenue Jacksonville, FL 32217 </div> </div> <div style="display: flex; justify-content: space-between;"> Date Signed 9/29/09 </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;"> x _____ Signature of Attorney </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <div style="display: flex; justify-content: space-between;"> Name of Attorney Firm (If any) Date </div> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Address </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Telephone No. </div>	
<div style="border-bottom: 1px solid black; margin-bottom: 5px;"> x _____ Signature of Petitioner or Representative (State title) </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Arrow Enterprise Computing Solutions, Inc Name of Petitioner </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <div style="display: flex; justify-content: space-between;"> Name & Mailing Rene Stasiak </div> <div style="display: flex; justify-content: space-between;"> Address of Individual Director, Financial Services </div> <div style="display: flex; justify-content: space-between;"> Signing in Representative Capacity 7459 Lima Street Englewood, Colorado 80112 </div> </div> <div style="display: flex; justify-content: space-between;"> Date Signed </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;"> x _____ Signature of Attorney </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <div style="display: flex; justify-content: space-between;"> Name of Attorney Firm (If any) Date </div> </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Address </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Jeffrey M. Galen 16255 Ventura Boulevard, Suite 900 Encino, California 91436 </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Telephone No. (818) 986-5685 </div>	
PETITIONING CREDITORS		
Name and Address of Petitioner Comerica Bank; 500 Woodward; Detroit, MI 48226	Nature of Claim Commercial Loan	Amount of Claim \$21,497,827.97 as of 9/24/09
Name and Address of Petitioner Viztek LLC; 6491 Powers Ave; Jacksonville, FL 32217	Nature of Claim Invoice for Materials	Amount of Claim \$52,311.82
Name and Address of Petitioner Arrow Enterprise Computing Solutions, Inc.	Nature of Claim Commercial Line of Credit	Amount of Claim \$3,551,640.14
Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.		Total Amount of Petitioners' Claims \$25,101,779.03

0 continuation sheets attached

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Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.		
<div style="border-bottom: 1px solid black; margin-bottom: 5px;"> x </div> <div style="display: flex; justify-content: space-between;"> Signature of Petitioner or Representative (State title) 9/25/09 </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Comerica Bank</div> <div style="display: flex; justify-content: space-between;"> Name of Petitioner Date Signed </div> <div style="margin-top: 10px;"> Name & Mailing Jacob Villemure Address of Individual Vice President Signing in Representative Capacity 500 Woodward Detroit, MI 48226 </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;"> x </div> <div style="display: flex; justify-content: space-between;"> Signature of Attorney 9-30-09 </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Date</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Name of Attorney Firm (If any)</div> <div style="margin-top: 10px;"> Telephone No. </div>	
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